



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



CONFIRMATION NO. 2621

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/714,078	<b>FILING OR 371(c) DATE</b> 11/14/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1641	<b>ATTORNEY DOCKET NO.</b> 071949-5408
------------------------------------	---	---------------------	-------------------------------	---

## APPLICANTS

Gunars E. Valkirs, Escondido, CA;  
 Jeffrey R. Dahlen, San Diego, CA;  
 Howard J. Kirchick, San Diego, CA;  
 Kenneth F. Buechler, Rancho Santa Fe, CA;

L/C

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 10/673,077 09/26/2003 which is a CIP of 10/371,149 02/20/2003 which is a CIP of PCT/US02/26604 08/20/2002 which claims benefit of 60/313,775 08/20/2001 and claims benefit of 60/334,964 11/30/2001 and claims benefit of 60/346,485 01/02/2002 and said 10/371,149 02/20/2003 is a CIP of 10/225,082 08/20/2002 which claims benefit of 60/313,775 08/20/2001 and claims benefit of 60/334,964 11/30/2001 and claims benefit of 60/346,485 01/02/2002

L/C

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

03/05/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 0	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>Qua. Look</i> Initials <i>L/C</i>				

## ADDRESS

30542

## TITLE

Diagnostic markers of stroke and cerebral injury and methods of use thereof

<b>FILING FEE RECEIVED</b> 1098	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
------------------------------------	---	---